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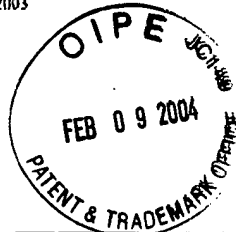
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7590

12/11/2003

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Lisa Butler (Depositor's name)  
*Lisa Butler* (Signature)  
February 9, 2004 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/047,873	01/14/2002	A. Russell Schindler	RTI 0102 PUS	5922

TITLE OF INVENTION: MULTI-ARRAYED VACUUM RECOVERY METHOD AND SYSTEM FOR GROUNDWATER WELLS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$300	\$965	03/01/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
UPTON, CHRISTOPHER	1724	210-620000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Jeffrey J. Chapp

2.

3.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Remediation Technologies, Inc.

Traverse City, MI

USA

Please check the appropriate assignee category or categories (will not be printed on the patent):

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4a. The following fee(s) are enclosed:

- ☒ Issue Fee  
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(Authorized Signature)

*Jeffrey J. Chapp*

(Date)

2-9-04

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